SUPPLEMENT
TO THE
BRITISH MEDICAL JOURNAL.

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SPECIAL NOTICE TO MEMBERS.

Every member is requested to preserve this "Supplement," which contains matters specially referred to Divisions, until the subjects have been discussed by the Division to which he belongs. BY ORDER.

MATTERS REFERRED TO DIVISIONS.

ANNUAL REPRESENTATIVE MEETING AT BELFAST.

FRIDAY, JULY 23RD, AND FOLLOWING DAYS.

NOTICES OF MOTION.

THE following Notices of Motion have been received for discussion by the Annual Representative Meeting of the Association, to be held at Belfast, July 23rd, 1909, and following days.

A.—NOTICES AFFECTING THE CHARTER.

Election of Representatives.

By the LIVERPOOL (WESTERN) DIVISION (Lancashire and Cheshire Branch):

That in By-law 25 (1) the words "each such Constituency being entitled to elect one Representative," be deleted.

By the LIVERPOOL (WESTERN) DIVISION (Lancashire and Cheshire Branch):

That in By-law 25 (2), for the first word of line 2, "one," substitute "a," and after the word "Constituency" insert the words "to elect one Member"; at the end add the words "Any Division having more than 50 Members may elect another additional Representative for every complete 50 (75, 100, or other number) additional Members.

B.—NOTICES AFFECTING THE PRESENT REGULATIONS OF THE ASSOCIATION.

Mode of Election of Council.

By the COUNCIL:

That the present By-laws of the Association, numbered 23 to 32 inclusive, relative to the composition and mode of election of Council be rescinded, and the corresponding By-laws, numbered 37 to 46 inclusive, in the Schedule to the Draft Charter, be adopted in substitution therefor, subject to such verbal amendments and alterations as the legal advisers of the Association may deem to be necessary.

By the DUNDEE BRANCH:

That the present By-laws relating to the Council, namely, 23 et seq., be amended by substituting for them the provisions of the Schedule to the Draft Charter, namely, Section VI., subject to such verbal amendments as in the opinion of the Association's legal advisers are necessary to bring them into harmony with the present Memorandum and Articles.

By the GATESHEAD DIVISION (North of England Branch):

That having regard to the repeated decisions of the Representative Meeting, confirmed by a large majority upon the Referendum, that the mode of election of the Council should be altered so as to provide for the reduction of the total membership of, and some representation of the Representative Meeting on, the Council, the present By-laws of the Association as to the composition and mode of election of the Council be amended so as to conform with those on the same subject appended to the Draft Charter submitted to the Privy Council.

Standing Committees.

By the Council:

That the Schedule to the present By-laws of the Association as to Standing Committees be amended by making such verbal changes as are necessary to bring it into conformity with the corresponding Schedule appended to the Draft Charter.

C.—NOTICES AFFECTING THE ADMINISTRATION OF THE ASSOCIATION.

Method of Distribution of Capitation Grants.

By the Wandsworth Division (Metropolitan Counties Branch):

That in view of the facts (1) that the policy of the Association is to consider the Division as the primary unit, each Division being free to govern itself in such a manner as it shall think fit; (2) that the decision as to what additional subjects shall be forwarded to the Divisions for consideration rests with the Representative Body and the Central Council, and not the Branch Councils; this Representative Body considers that it is illogical any longer to place in the hands of Branch Councils the funds for distribution to the Divisions, while at the same time depriving them of any control over the objects for which the money is used, and instructs the Central Council to so amend the By-laws as to place the distribution in the hands of the Central Council, which can make capitation grants to all Divisions and Branch Councils as may be required.

The "British Medical Journal."

By the Waterford Division (South-Eastern of Ireland Branch):

That the British Medical Journal should more largely advocate the rights, interests, and claims of the medical masses in the future than it has done in the past.

Appointment of Materia Medica Committee.

By the Waterford Division (South-Eastern of Ireland Branch):

That the Council be requested to appoint a Materia Medica Committee, whose duty it will be, with such professional aid as they can summon to their assistance, to investigate and pronounce on the uses and properties of all drugs which shall be used by the profession, and that in view of the grave injury inflicted on the public and on the profession alike by the present wholesale introduction of drugs by mere commercial firms, whereby the ground is being cut from under our feet, and the gullible public are induced to accept nostrums on the sole strength of mere assertions, that the hospitality of our museum and the pages of our Journal shall be both shut out from giving any further aid to the wholesale advertisements of drugs and preparations, the sole virtues of which have too often no existence save in the mendacity of their introducers.

Scientific Work of the Association.

By the Wandsworth Division (Metropolitan Counties Branch):

That, with a view to further interesting Divisions and Branches in the Section work of the Annual Meeting, it be an instruction to the Central Council to encourage them to nominate one or more members to take part in the discussions of any subject arranged for, which has previously been considered by the Division or Branch.

Promulgation of Policy of the Association.

By the Wandsworth Division (Metropolitan Counties Branch):

That it be an instruction to the Central Council to investigate and report as to the best means for bringing before the Members those conclusions of this Representative Body arrived at from time to time which define the policy of the Association, with a view to their general acceptance and adoption throughout the Association.

Representatives at the United Kingdom Hospitals Conference.

By the Wandsworth Division (Metropolitan Counties Branch):

That this Representative Body do annually elect twenty-five of its Members, of which not less than three shall be Representatives from Scotland, and not less than three Representatives from Ireland, to represent it at the United Kingdom Hospitals Conference, so long as these Conferences shall continue to be held, together with others to be elected by the Central Council, and that they do report to this Body.

D.—NOTICES AFFECTING THE POLICY OF THE ASSOCIATION.

Contract Practice.

By the Wandsworth Division (Metropolitan Counties Branch):

That it be an instruction to the Central Council to formulate Resolutions embracing the main principles as affecting Medical Contract Practice.

By the Wandsworth Division (Metropolitan Counties Branch:

That the proposed Federated Societies Medical Benefit Association should not receive the support of members of the Association, since it contravenes the conditions which the Association has approved for the regulation of Contract Practice.

Public Medical Service.

By the St. Pancras and Islington Division (Metropolitan Counties Branch):

That the time is now opportune for the British Medical Association to take into consideration the drafting of a scheme for a Public Medical Service, to embrace Philanthropic Dispensaries and Medical Services, School Clinics, the Poor Law Medical Service, Provident Dispensaries, and the Medical Services of Friendly Societies and Clubs.

Hospital Administration.

By the Waterford Division (South-Eastern of Ireland Branch):

That the Council be instructed to take steps to give practical effect to the Oxford resolutions on the subject of gratuitous or semi-gratuitous hospital treatment of the well-to-do.

By the Wandsworth Division (Metropolitan Counties Branch) (as an amendment to the Report and Recommendation of the Hospitals Committee *re* Medical Certification of Suitability of Patients for Hospital Treatment):

That except in emergencies a medical certificate of suitability for hospital treatment be required as a condition of hospital treatment.

Management of General and Cottage Hospitals.

By the Wandsworth Division (Metropolitan Counties Branch):

That the management of General and Cottage Hospitals should be vested in a Committee on which the local medical profession is adequately represented by directly elected representatives.

Medical Teaching.

By the Waterford Division (South-Eastern of Ireland Branch):

That it is contrary to the interests of the profession that the mass of the profession, and even the majority of members of hospital staffs, should be excluded, as at present, from all share of medical teaching.

Medical Examinations.

By the Waterford Division (South-Eastern of Ireland Branch):

That all medical examinations ought to be duly advertised, and open to the presence of every registered medical practitioner.

By direction of the Chairman of Representative Meetings,

J. Smith Whitaker, *Medical Secretary.*

April 21st, 1909.

Meetings of Branches & Divisions.

***The proceedings of the Divisions and Branches of the Association relating to Scientific and Clinical Medicine, when reported by the Honorary Secretaries, are published in the body of the* JOURNAL.]**

BERMUDA BRANCH.

A MEETING of this Branch was held at the Board Room, Public Buildings, Hamilton, on January 30th, Colonel J. C. CULLING, R.A.M.C., in the chair.

Resignation of Honorary Secretary.—Dr. Harvey, after having completed twenty-three years of service as Honorary Secretary of the Branch, begged to be allowed to resign his duties, and Dr. W. E. Tucker was elected in his place. A vote of thanks to Dr. Harvey for his long services was proposed, seconded, and carried unanimously.

Accounts.—The accounts were laid on the table, adopted, and passed.

Proposed Midwives Act.—A discussion took place on the provisions of a Midwives Act which it is proposed to introduce into Parliament at the next session, the objects of this Bill being to provide for the education, registration, and control of midwives practising in the colony.

The following resolutions were passed:

1. That it is the opinion of this meeting that many of those now practising as midwives are inefficient.
2. That steps should be taken for the proper training, control, and registration of midwives.

METROPOLITAN COUNTIES BRANCH:

HAMPSTEAD DIVISION.

A MEETING of the Division was held on March 23rd at the Hampstead Conservatoire, Dr. OPPENHEIMER in the chair.

Resignation of Dr. Yeld.—A letter from Dr. Yeld resigning the secretaryship of the Division was read, and the Chairman was requested to write, in the name of the Division, to Dr. Yeld expressing the great regret with which the Division accepts his resignation and its grateful appreciation of his valuable services as Honorary Secretary during the last five years.

Representation at Representative Meeting.—Mr. H. W. Armit was appointed to represent the Division at the Representative Meeting.

Vaccine Therapy.—Sir ALMROTH WRIGHT gave an address on the principles of vaccine therapy, which was followed by a discussion, in which Drs. FORD ANDERSON, ARMIT, and PARSONS took part, and a cordial vote of thanks to Sir Almroth Wright for his very interesting and suggestive address was carried by acclamation.

Hampstead Hospital.

A meeting of the local profession was held under the auspices of the Hampstead Division on Saturday, March 20th, to consider the Hampstead Hospital question in its present development, and to formulate definitely the attitude which the profession in Hampstead should take towards it. Dr. OPPENHEIMER (Chairman) gave the reasons why it was thought desirable to convene the meeting, and Mr. ARMIT gave a summary of the Hampstead Hospital question subsequent to July 3rd, 1907, the date of the last meeting of the profession on the question. The following resolutions were proposed, seconded and carried *nem. con.*:

1. That it is the opinion of this meeting that a substantial portion of the Hampstead Hospital should be set aside as a home hospital for local needs.
2. That the home hospital should contain both contributory and free beds, and be served by local practitioners.
3. That sufficient guarantee be given that no out-patient department shall be opened in Hampstead.
4. That the local profession be entitled to nominate representatives to serve on the council of the hospital.

The following resolution was proposed, seconded, and carried:

That when patients in the home hospital are not attended by their own doctor, they shall be served by local practitioners according to *rota*, elected by the profession.

RICHMOND DIVISION.

A GENERAL meeting of this Division was held on Wednesday, April 14th, at the Royal Hospital, Richmond.

Thirty-eight Years of Professional Life.—Dr. J. R. LEESON read a paper entitled, Thirty-eight Years of Medical Life: A Retrospect and Prospect. He began by contrasting medical education in the early Seventies with that of to-day, and spoke of the revolution in thought the discovery of the microbe had effected. The subsequent introduction of antiseptics had remodelled the practice of medicine, surgery, and midwifery. The complex prescription had disappeared, and many of our now commonest drugs were of quite recent origin. Much of the prestige and veneration that surrounded the old doctor had disappeared, and the general diffusion of medical knowledge amongst the laity by the press and cheap literature had tended to diminish his dignity. Acute diseases were now known to run a definite course, but little influenced by drug treatment. Diagnosis was insisted upon as being the practitioner's sheet-anchor, and his best defence against the prescribing chemist and modern quackery, but in the present state of badly-paid club and low-class practice the time required for such was ruinous. Many causes were instanced as unfavourably influencing the practitioner—the general decline of middle-class prosperity, the decline in their birth-rate, and the abuse of hospitals by those who could afford to pay for attendance; the change of treatment in many chronic diseases, such as phthisis, enlarged prostate, and gall stones, etc.; the minimizing of sepsis in surgery and midwifery, and the general advance of sanitation, though of infinite benefit to humanity, had all told against his chance of earning a living, and although the general scale of living and the rise of wages and rates had almost doubled during the present generation, his fees had steadily diminished. The doctors of the past had derived much of their income from their "medicines," and their remuneration had been largely based upon this scheme; but now drugs were less in use, whilst the fees of general practitioners for diagnosis and skilled advice had been stationary, if not regressive. From his experience the general practitioner had a struggle to live, and, considering the knowledge required, and the danger, anxiety, and worry of his calling, by night as well as by day, the remuneration was sadly out of proportion to his work. He had never known a general practitioner retire upon his professional earnings. The applications for relief from such a charity as the Royal Epsom Medical College, of which he had been local honorary secretary for many years, and for its pensions were heart-rending, and showed the widespread distress amongst the widows and orphans of the profession. The outlook from a remunerative aspect was gloomy. How could club work be properly done for a penny a week; how could the poor of a parish of 27,000 people be properly doctored for £80 a year? There were certainly three remedies which should be applied: (1) A higher standard of general knowledge should be required for the entrance examination; (2) greater attention should be paid to diagnosis and the thorough investigation of all cases under treatment, for which fees proportionate to the skill and time required should be demanded; this would diminish the incursions of the prescribing chemists, modern quackery, Christian Science, *et hoc genus omne;* and lastly (3), some righteous form of trade unionism and combination, to lift the workers above the woes of "the sweating systems" now in vogue. Truly it was a noble profession—the noblest—offering countless opportunities for the highest qualities of heart, head, and hand, but, as some one said to him, "a devil of a business!" For the sake of the humanity which it sought to serve it must be rescued from the impecunious and embarrassing conditions into which it was drifting. Under present conditions he regarded it more as a philanthropy than as a profession; but how could it thus hope to attract into its ranks the best brains and fibres of the community which it so imperatively demanded? A discussion followed, and Dr. LEESON, who was heartily thanked for his paper, replied.

STRATFORD DIVISION.

A MEETING of this Division was held on Thursday, April 15th, at the Alexandra Hotel, Stratford, E., Dr. J. BIERNACKI presiding.

Address.—Dr. C. O. Hawthorne delivered a very interesting address on the *British Pharmacopoeia*, and, after answering a number of questions, was awarded a very hearty vote of thanks.

NORTHERN COUNTIES OF SCOTLAND BRANCH.

A clinical meeting of this Branch was held at the Northern Infirmary, Inverness, on March 27th. Twenty-two members were present.

Apologies for Non-attendance.—Apologies were received from Drs. Norman Walker, Duncan, Sellar, Kirkwood, etc.

Demonstration.—Dr. Gordon Lang gave a cystoscopic demonstration, and exhibited cases which had been under his care in the *x*-ray department of the Northern Infirmary.

Pyosalpinx.—Dr. Munro Moir read notes on a case of pyosalpinx of the left Fallopian tube, which was removed.

Mycosis Fungoides.—Dr. Simpson (Golspie) contributed a paper on mycosis fungoides. When first seen in 1892 the patient, a married woman aged 44, with several healthy children, suffered from what Dr. Simpson took to be a single patch of dry eczema, about the size of a shilling, situated on the right side of the neck, below and behind the angle of the jaw. This was treated with zinc-ichthyol paste. The irritability was lessened, but the patch was not cured. In 1900 Dr. Allan Jamieson saw the patient. By this time the patch had increased in size, and there were similar patches on the lower part of the face on the same side. After two attacks of erysipelas, in 1900 and 1901, there was distinct relief in the irritability of the patches, and they seemed less active. This condition did not last long, and about the middle of 1901 the activity was renewed, the patches became worse, and Dr. Allan Jamieson, who again saw her in 1902, reported that the case was unmistakably one of classical mycosis fungoides. She was treated by *x* rays from June to October, and returned to Golspie practically cured; with the exception of some slightly irritable patches on her back there was nothing remaining of the disease; the tumours had evidently disappeared. From the end of 1902 until the spring of 1905 she remained well, when she was again seen by Dr. Simpson; she complained at that time of fresh patches on the back, abdomen, and legs; they were all in the "eczematous" stage. As *x* rays were available in the Lawson Memorial Hospital, Golspie, she attended three times a week for treatment. Short exposures (four to five minutes) with a medium tube at a distance of 6 to 10 or 12 in., according to the size of the patch, gave great relief. Dr. Simpson did not see the patient from April, 1906, until December of that year, when the condition was much worse. The characteristic tumours had developed on the back and on the front of the forearms; there were large thickened oozing patches on the abdomen, under the breasts, on the hips, and on the insides of the thighs. The *x* rays were vigorously renewed, but she did not attend for treatment as regularly as could be desired. The tumours on the back readily yielded to treatment by the *x* rays, but her general condition did not improve. In June, 1907, she became so weak that she was unable to attend hospital. The mucous membrane of the soft palate became red and oedematous, and later the soft palate and roof of the mouth ulcerated in patches, making swallowing extremely difficult. There was a fetid odour from the mouth. The tumours on the arms broke down, and became offensive and difficult to dress. She became unable to swallow nourishment, and died in September, 1907. There are some interesting points which may be mentioned: (1) It was a case of classical mycosis fungoides; (2) it was, as far as Dr. Simpson is aware, one of the first cases treated by *x* rays; (3) although the disease did return, the parts originally treated and cured in Edinburgh Royal Infirmary by the *x* rays remained unaffected to the end.

Sciatica.—Dr. Kaye (Strathpeffer) contributed a paper on sciatica, and remarked that the term "sciatica" was commonly used in an extremely elastic sense, and based his notes chiefly with the view of determining the legitimate meaning of "sciatica." In most textbooks the word was not defined, but it was generally implied that it causes pain in the course of the great sciatic nerve, which might be a true neuralgia—that is, a pain of the real explanation of which next to nothing was known—or due to a primary inflammation of the nerve, or rather of the connective tissue elements. As the ideal of all nosological nomenclature should be to name diseases according to their causes, this implied definition was the best possible, and the term "sciatica" should be confined entirely to cases which fell within this category. Thus, pain referred to the sciatic region and due to pressure or inflammation arising in the spine, pelvis, buttock, hip, or any other structures near or among which the nerve passed in its course should *not* be called "sciatica" any more than pain due to a sarcoma of the head of the humerus or a suppurating shoulder-joint should be called "brachial neuritis." It followed that the presence or absence of any of these potential causes for the pain should be fully investigated; it was only after the exclusion of such conditions, coupled with the presence of symptoms and physical signs of a pathological condition of the great sciatic nerve, that a diagnosis should be made. Dr. Kaye related the cases of three patients recently under his care, all labelled "sciatica," but who in his opinion suffered from totally different diseases, which involved widely different prognosis and treatment. In two of the cases the symptoms complained of were due to disease of a tuberculous nature in the neighbourhood of the hip-joint, the other being obviously due to adhesions about the sciatic nerve. Dr. Kaye submitted that the term "sciatica" should not be applied to various conditions of structures other than the sciatic nerve which caused pain in the thigh, but should be strictly confined to: (1) A neuralgia—that is, as abnormality of the nerve in its connexions could be demonstrated by pathological methods, it was distinguished clinically by irregular intermittence of the pain, the existence of tender points along the course of the nerve, and the absence of pain on stretching the nerve; (2) the more common form, which pathologically was a perineuritis or interstitial neuritis, was ordinarily described as being rheumatic or gouty in origin. Dr. Kaye also described a chronic form of sciatica, giving two varieties according to the anatomical distribution of the fibrous tissue: (1) Those cases which were due to adhesions between the perineurium and the structures within or without it; these were characterized by the onset of pain only when the nerve was pulled upon, as, for instance, by the act of walking, or by extending the leg on the flexed thigh; there was also some tenderness of the nerve on manipulation, but no other signs. (2) The cases in which the nerve fibres were bound up by the interstitial development of fibrous tissue; in these the pain was almost constant, but was increased by movement. The nerve was tender on manipulation; there was paraesthesia or anaesthesia of the cutaneous distribution, and in extreme cases muscular wasting and paresis with loss of knee-jerk. Dr. Wm. Bruce (Dingwall) also contributed a short paper on sciatica. He referred, as Dr. Kaye had done, to the looseness of the term "sciatica," and urged the necessity of making sure that the possibility of the presence of mischief in the hip-joint was excluded. Dr. Bruce referred to the presence or absence of lameness, heat or swelling of the articulation, and muscular wasting. Tenderness on pressure, more especially at the upper aspect of the articulation, was often severe. Dr. Bruce mentioned that in the large majority of his cases a certain amount of disability had been discovered either on flexion, extension, internal or external rotation. There were a few cases he had met with where he had not been able to make out any impediments, or pain in passive movements, but in a good few he had discovered far advanced ankylosis, occasionally entirely overlooked.

Artificial Immunity in Tuberculosis.—Dr. de Watteville (Kingussie) read a short paper on this subject. He dwelt on the success of hygienic, dietetic, and medicinal treatment. But the success in these cases was limited. Germicides could not be introduced into the body in sufficient quantity to make decided and lasting impression. Dr. de Watteville described (1) passive immunity, which was abandoned as unsatisfactory; (2) active immunity, by means of Koch's TR, which was the only one used clinically. The preparation was given in gradually increasing doses guided by clinical symptoms, but the results were unsatisfactory and often attended with harm. Reference was also made to Wright's work on opsonins and to the opsonic index as a guide in tuberculin treatment.

SOUTH-EASTERN BRANCH:

MAIDSTONE DIVISION.

A MEETING of this Division was held at the Kent County Ophthalmic Hospital on Thursday, April 15th, at 3 p.m. There were present: F. T. Travers, M.B., F.R.C.S.Edin., Chas. Killick, M.D., F.R.C.S., Drs. Palm, Southwell Sander, Black, Parr-Dudley, Forge, Ryan, and Geo. Potts, Honorary Secretary.

Confirmation of Minutes.—The minutes of the previous meeting were read and confirmed.

Paper, Cases, Etc.—Mr. KILLICK gave a short account of iridectomies performed for various causes, and showed cases to demonstrate the results especially for glaucoma. Mr. Killick also showed several other interesting cases. Dr. RYAN, who was welcomed by the Chairman as a new member, showed a case of omphalomesenteric, and enumerated several cases of syphilis, chorea, and pernicious anaemia successfully treated by soamin.

Apologies for Non-attendance.—Letters of regret for non-attendance were read from Drs. Wolseley, Lewis, Douglas, and Joyce.

Postponement of Resolution.—Dr. Joyce's resolution was allowed to stand over to next meeting.

Proposed Division of Branch.—Dr. Stewart's letter was read *re* division of the South-Eastern Branch, and it was unanimously resolved that this Division agree to there being a separate Kent Branch.

Resolution of Sympathy.—Dr. Gallard's letter was read, and the Honorary Secretary instructed to convey the Division's sympathy.

Letter of Warning to Head Masters of Schools.—Dr. PARR-DUDLEY gave notice that he would propose the following resolution at the next meeting:

> That the letter of warning issued by the Manchester Division to the head masters of schools in their Division with reference to the medical profession shall also be issued by this Division to the head masters of schools in Kent.

Attendance at Meetings.—It is particularly requested that members of the Division should endeavour to attend the meetings of the Division. The Honorary Secretary would be very glad if members would kindly inform him if they desire to read papers or show cases at the next meeting or any subsequent meetings, as it is the wish of the members to make the meetings of clinical interest. The names of new members will be gladly received by Geo. Potts, Honorary Secretary, Kent County Ophthalmic Hospital, Maidstone.

SOUTH-EASTERN OF IRELAND BRANCH.

A MEETING of this Branch was held at Adelphi Hotel, Waterford, on April 7th, at 3.30 p.m. In the absence of P. J. Murphy, F.R.C.S.I. (President), Dr. MACKESY was voted to take the chair. Fourteen members were present.

Apologies for Non-attendance.—Three members sent apologies for non-attendance.

Confirmation of Minutes.—The minutes of the last meeting were read, approved, and signed.

Well-to-do Patients and Hospitals.—It was proposed by Dr. Jos. POWER and seconded by Dr. WM. SHEE:

> That the modification suggested by the Irish Committee regarding Resolution 2 (see SUPPLEMENT, September 19th, 1908, p. 198), *re* admission of well-to-do patients into union hospitals, passed at the meeting of the Branch held at Waterford on September 2nd, 1908, and accepted in its amended form by the Branch meeting (see SUPPLEMENT, March 20th, p. 139) held at Carlow on March 3rd, 1909, be rescinded and that the original Resolution stand.

Fees under Employers' Liability Act, etc.—Dr. MACKESY moved and Dr. JELLETT seconded:

> That the members of this Branch bind themselves not to accept less than one guinea for examination and report in any case under the Employers' Liability Act, Workmen's Compensation Act, Fatal Accidents Act, or at Common Law, whether the same be furnished on behalf of employers or insurance companies.

The motion was carried. It was proposed by Dr. WM. SHEE, and seconded by Dr. Jos. POWER:

> That this resolution be circulated amongst members and published in the local press.

The motion was carried.

Dinner.—This concluded the business of the meeting and the members dined together.

To ensure the insertion of notices in this column, they must be received at the Central Offices of the Association not later than the first post on Tuesday.

Association Notices.

COUNCIL MEETING.

A MEETING of the Council will be held at 2 o'clock in the afternoon of Wednesday, April 28th, in the new Council Room, at 429, Strand, London, W.C.

By Order,

March 25th, 1909. GUY ELLISTON.

BRANCH AND DIVISION MEETINGS TO BE HELD.

BATH AND BRISTOL BRANCH.—The sixth ordinary meeting of the session will be held at the Museum, Bath, on Wednesday evening, April 28th, at 8 o'clock, Mr. J. Paul Bush, C.M.G., President. The following papers are expected:—W. P. Kennedy, M.D.: Cancer Treatments; F. G. Thomson, M.D.: Referred Cardiac Pain; J. M. H. Munro, D.Sc.: Case of Early Addison's Disease, treated with Tuberculin; G. H. H. Almond, M.B.: Theoretical Considerations of Pulmonary Auscultation. A Council meeting will be held at 7 55. Trains (G.W.R.), Bristol to Bath, 7.24; Bath to Bristol, 9.55.—W. M. BEAUMONT, NEWMAN NEILD, Honorary Secretaries.

BATH AND BRISTOL BRANCH. — *Election of Representatives of the Branch upon the Central Council.* — Nominations of candidates for election to the Central Council must be forwarded to the Honorary Secretaries not later than May 8th. The Branch is entitled to elect one member.—NEWMAN NEILD, Richmond Hill, Clifton; W. M. BEAUMONT, 4, Gay Street, Bath.

DORSET AND WEST HANTS BRANCH.—The spring meeting of this Branch will be held in Dorchester on Wednesday, May 5th. —JAMES DAVISON, Honorary Secretary, "Streateplace," Bournemouth.

LANCASHIRE AND CHESHIRE BRANCH.—*Election of Representatives of the Branch on the Council of the Association.*—Nominations of candidates must be sent in writing on or before May 8th next to F. CHARLES LARKIN, Branch Secretary, 54, Rodney Street, Liverpool.

LANCASHIRE AND CHESHIRE BRANCH.—A general meeting of the Branch will be held on Wednesday, May 12th, at the New Manchester Royal Infirmary (by kind invitation of the Committee and Medical Board). Details will be published later.—F. CHARLES LARKIN, Branch Secretary.

METROPOLITAN COUNTIES BRANCH.—*Nominations of Branch Officers.*—Pursuant to By-law 25, notice is hereby given that nominations for all the officers of the Branch—namely, President-elect, Vice-Presidents, Secretary, members of the Branch on the Central Council of the Association—must be sent in to the Honorary Secretary of the Branch on or before May 29th. Voting papers will be sent out on or before June 5th, and must be returned to the Secretary on or before June 12th.—ATWOOD THORNE, E. W. GOODALL, Honorary Secretaries.

METROPOLITAN COUNTIES BRANCH: LAMBETH DIVISION.—The next meeting of the Lambeth Division will be the annual general meeting, and it will be held on May 6th, at 4 p.m., in Bethlem Hospital. Agenda:—(1) Minutes of the previous meeting. (2) A matter referred to the Divisions from the Hospitals Committee, *re* contributions to hospitals by employers of labour and employees (see SUPPLEMENT, February 27th, 1909, p. 102). (3) *Re* sanatoriums for workers suffering from tuberculosis. The following motion is referred to the Divisions from the Annual Representative Meeting at Sheffield: "That, in the opinion of the Representative Meeting, it is not advisable that members of the Association should in future accept, or continue to hold, appointments as Honorary Local Medical Referees to the National Association for the Establishment and Maintenance of Sanatoria for Workers Suffering from Tuberculosis, and that the Divisions be requested to consider the matter as affecting any of their own members, or other practitioners in their respective areas, who may hold such appointments." (4) To consider the following communication from the Chelsea and Fulham Division: "That we, the Chelsea and Fulham Division of the Metropolitan Counties Branch of the British Medical Association, deeply regret and resent the action of the Council of the Royal College of Surgeons of England, in that having ascertained the wishes of a majority of the Fellows and Members of their College, that they should deliberately flout that opinion in the recent alteration of their By-laws, and that a copy of this resolution should be sent to the other Divisions of the British

Medical Association." (5) Election of officers for the ensuing session. The following names are suggested by the Executive Committee: *Chairman*, W. H. B. Stoddart, M.D.; *Vice-Chairman*, J. V. G. Denning, L.R.C.P.I.; *Honorary Secretary*, *Herbert French, M.D., F.R.C.P.; *Representative at Representative Meetings*, *R. Esler, M.D.; *Representative upon the Branch Council*, R. Capes, Esq., M.R.C.S., L.R.C.P., and Honorary Secretary of the Division *ex officio*; *Executive Committee*, *E. A. Edelsten, M.B., M.R.C.S., *W. E. Sturges-Jones, M.R.C.S., L.R.C.P., *H. J. Spon, M.R.C.S., L.R.C.P., G. F. Grant, M.B., T. H. P. Peers, L.M.S.S.A., V. A. Jaynes, M.R.C.S., L.R.C.P., W. A. Atkinson, M.D. (*Those marked with an asterisk held this office last year.) Members of the Division desirous of nominating other candidates for any of the above offices are requested to send the names of their nominees, duly seconded, together with a note to indicate the willingness of the nominee to accept the office if elected, to the Honorary Secretary of the Division, at 26, St. Thomas Street, S.E. (6) Dr. Hyslop will give clinical demonstrations upon cases from the wards of the Bethlem Royal Hospital. (7) Other business, if necessary.—HERBERT FRENCH, Honorary Secretary, Lambeth Division, 26, St. Thomas Street, S.E.

METROPOLITAN COUNTIES BRANCH: ST. PANCRAS AND ISLINGTON DIVISION.—This Division will hold a meeting at the Midland Grand Hotel, King's Cross, on Tuesday, May 4th, at 9 p.m. Dr. Lauriston Shaw, Physician to Guy's Hospital, will open a discussion on Some Points in the Diagnosis of Gastric Disease.—W. GRIFFITH, Honorary Secretary.

MIDLAND BRANCH: LEICESTER AND RUTLAND DIVISION.—A meeting of this Division will be held in the Leicester Infirmary on Wednesday, April 28th, at 4.15 p.m. Agenda:—Minutes of previous meeting. Consideration of the following matters referred to Divisions: (1) Medical certification of suitability of patients for hospital treatment (SUPPLEMENT, February 27th); (2) Contributions to hospitals by employers of labour and employees (SUPPLEMENT, February 27th); (3) Relating to fresh public medical institutions; (4) Relating to sanatoriums for workers suffering from tuberculosis; (5) Relating to appointments as medical officers of health (SUPPLEMENT, January 23rd). Any other business. — WILFRED E. GIBBONS, Honorary Secretary.

SOUTH-EASTERN BRANCH.—The annual meeting of this Branch will be held at Croydon on Wednesday, June 23rd, Dr. J. J. Macan, President-elect, in the chair. The following will be the agenda:—(1) To elect the officers of the Branch; nominations by three members for the offices of President-elect, Vice-Presidents, and Secretary, may be sent to the Honorary Secretary on or before May 21st. (2) To receive the annual report of the Branch. (3) To transact any business that may be transacted by an ordinary meeting. Three members to represent the Branch on the Central Council will also be elected by voting papers. Nominations for these posts, each by three members in meeting, should be sent to the Honorary Secretary on or before May 21st.—H. M. STEWART, Honorary Secretary, Dulwich.

SOUTH-EASTERN OF IRELAND BRANCH.—The annual meeting of this Branch, as also a meeting of the Branch Council and the local Division, will be held at the Victoria Hotel, Kilkenny, on Wednesday, May 5th, at 5.15 p.m. Agenda:—(1) Minutes of last meeting. (2) Letters of apology. (3) Correspondence. (4) Installation of President-elect. (5) Election of officers of the Branch for the ensuing year. (6) Dr. Laffan's motion deferred. Any other business. Dinner.—J. QUIRKE, Honorary Secretary, Piltown.

SOUTH MIDLAND BRANCH.—In accordance with By-law 25, notice is hereby given that nominations for the election of a Representative of this Branch on the Central Council must be sent to me not later than May 22nd next.—E. HARRIES-JONES, 16, Castilian Street, Northampton.

SOUTH MIDLAND BRANCH: BEDFORD AND HERTS DIVISION.—A meeting of the Division will be held on Thursday, May 6th, at 3 p.m., at the County Hospital, Bedford. Business: Matters referred to Divisions: (1) Report on medical certificates of suitability of patients for hospital treatment. (2) Report on contributions to hospitals by employers of labour and employees. (3) Statement as to fresh public medical institutions. (4) Statement as to sanatoriums for workers suffering from tuberculosis (see SUPPLEMENT, February 27th). (5) Departmental Committee *re* Midwives Act.—E. H. COBB, Honorary Secretary, Belmont, Stevenage.

STAFFORDSHIRE BRANCH.—The third general meeting of the session will be held at the Victoria Hotel, Wolverhampton, on Thursday, April 29th. The President, Dr. S. King Alcock, will take the chair at 5.25 p.m. Business: (1) Minutes of the last general meeting. (2) Correspondence. (3) Exhibition of living cases. Papers:—(*a*) Dr. W. Spencer Badger: The Chest of the Elementary School Child. (*b*) Dr. J. A. Codd: The Treatment of Glandular Enlargements by *X* Rays. (4) Exhibition of Pathological Specimens, etc. Dinner at 7 p.m.; charge, 5s. A meeting of the council will be held immediately before the general meeting to fix the date of the annual council meeting.—G. PETGRAVE JOHNSON, Honorary General Secretary, Stoke-on-Trent.

ULSTER BRANCH.—The spring meeting of this Branch will be held in Londonderry on Saturday, May 8th. Members having communications to make to the meeting are requested to send particulars not later than April 30th to CECIL SHAW, Honorary Secretary, 29, University Square, Belfast.

British Medical Association.

GRANTS AND SCHOLARSHIPS FOR SCIENTIFIC RESEARCH.

GRANTS.

THE Council of the British Medical Association is prepared to receive applications from members of the Medical Profession for Grants in aid of Researches for the Advancement of Medicine and the Allied Sciences.

The Grants are made subject to the following conditions:

1. That the work of the Grantee shall be subject to inspection by the Science Committee of the Association.

2. That each Grantee shall furnish to the Science Committee, on or before May 15th following the allotment of the grant, a report (or, if the object of the grant be not then attained, an interim report, to be renewed not later than the same date in each subsequent year until the final report is presented) containing:

(*a*) A statement, in a form satisfactory to the Science Committee, of the results arrived at, or the stage which the inquiry has reached;

(*b*) A statement of expenditure incurred, accompanied by vouchers as far as possible;

(*c*) A reference to any Transactions, Journals, or other publications in which the results of the research have been announced.

SCHOLARSHIPS.

The Council of the British Medical Association is also prepared to receive applications for Research Scholarships, as follows:

1. An ERNEST HART MEMORIAL SCHOLARSHIP, of the value of £200 per annum, for the study of some subject in the department of State Medicine.

2. THREE RESEARCH SCHOLARSHIPS, each of the value of £150 per annum, for research in Anatomy, Physiology, Pathology, Bacteriology, State Medicine, Clinical Medicine, or Clinical Surgery.

Each Scholarship is tenable for one year, but is renewable by the Council, provided that the whole period of tenure shall not exceed three years.

The Scholarships are awarded subject to the following conditions:

1. That the work of the Scholar shall be subject to inspection by the Science Committee of the Association.

2. That he shall furnish the Science Committee, on or before May 15th following the grant of the Scholarship, with a statement of the work done by him.

3. That he sign an undertaking to abide by the above and other regulations affecting Scholarships, a copy of which will be supplied to him.

Applications.

Applications for Grants and Scholarships for the year 1909–10 must be made, not later than May 27th, 1909, in the prescribed form, a copy of which will be supplied on application to the Medical Secretary, 429, Strand, London, W.C.

Each application should be accompanied by a recommendation from the head of the laboratory in which the applicant proposes to work, setting out the fitness of the candidate to conduct such work and the probable value of the work to be undertaken. This is not intended, however, to prevent applications for Grants in aid of work which need not be performed in a recognized laboratory.

J. SMITH WHITAKER, *Medical Secretary.*

429, Strand, W.C.,
March, 1909.

LOCAL EDUCATION AUTHORITIES (MEDICAL TREATMENT) BILL.

THIS bill was introduced by Mr. Walter Guinness on April 1st, and is supported by Mr. Adkins, Mr. Bridgeman, Lord Robert Cecil, Mr. Fell, Mr. H. C. Gooch, Mr. Leif Jones, Mr. Ramsay Macdonald, Mr. Maddison, Mr. Peel, Mr. Vivian, and Mr. Whitwell Wilson.

MEMORANDUM.

This bill proposes to enable local education authorities to recover the cost of the medical treatment of children, where such treatment is provided under section thirteen of the Education (Administrative Provisions) Act, 1907. Local education authorities already have power to recover the cost of meals from parents under the Education (Provision of Meals) Act, 1906. Parents who neglect to provide necessary medical aid are liable to conviction under section twelve of the Children's Act of 1908, but there is no power to enable the local authority to recover the cost of treatment.

A BILL to provide for the recovery by local education authorities of costs for medical treatment of children attending public elementary schools in England and Wales.

Be it enacted by the King's most Excellent Majesty, by and with the advice and consent of the Lords Spiritual and Temporal, and Commons, in this present Parliament assembled, and by the authority of the same, as follows:

1. *Recovery by Local Education Authority of Cost of Medical Treatment.*—Where any Local Education Authority provides for the medical treatment of children attending any public elementary school under section thirteen of the Education (Administrative Provisions) Act, 1907, there shall be charged to the parent of every child in respect of any treatment provided for that child such an amount not exceeding the cost of treatment as may be determined by the Local Education Authority, and in the event of payment not being made by the parent it shall be the duty of the Authority, unless they are satisfied that the parent is unable by reason of circumstances other than his own default to pay the amount, to require the payment of that amount from that parent, and any such amount may be recovered summarily as a civil debt.

2. *Franchise, Etc., to be Unaffected by Failure of Parents to Pay.*—The failure on the part of any parent to pay any amount demanded under this Act in respect of any medical treatment shall not deprive the parent of any franchise, right, or privilege, or subject him to any disability.

3. *Definition.*—In this Act the word "parent" shall have the same meaning as in the Elementary Education Act, 1870.

4. *Short Title.*—This Act may be cited as the Local Education Authorities (Medical Treatment) Act, 1909.

INFANT LIFE PROTECTION BILL.

THIS bill was introduced by Lord Robert Cecil on April 1st, and is supported by Mr. Shackleton, Mr. Chiozza Money, and Mr. Simon.

MEMORANDUM.

It is felony punishable by penal servitude for life to procure miscarriage. It is murder to kill a fully-born child. To destroy a child while it is being born and before it is fully born is no offence whatever. The object of this bill is to put an end to this anomaly.

A BILL to Prevent the Destruction of Children during Birth.

Be it enacted by the King's Most Excellent Majesty, by and with the advice and consent of the Lords Spiritual and Temporal, and Commons, in this present Parliament assembled, and by the authority of the same, as follows:

1. *Punishment for Destroying Life of Child during Birth.*—Any person who shall destroy the life of a child during the birth thereof, and before the same shall have been fully born, in such a manner that he would have been guilty of murder if the child had been fully born, shall be guilty of felony, and being convicted thereof shall be liable to penal servitude for life: Provided that a registered medical practitioner shall not be guilty of an offence under this Act who by means employed in good faith for the preservation of the life of the mother of the child destroys the life of any such child during its birth.

2. *Alternative Verdict on Trial for Child Murder.*—If on any trial for the murder of a child it shall be proved that the person accused destroyed the life of such child, in such manner as aforesaid, but not that such child was fully born at the time at which its life was so destroyed, it shall be lawful for the jury to find that such person destroyed the life of such child, in such manner as aforesaid, and thereupon the court may pass such sentence as if such person had been convicted upon an indictment for the felony in the first section of this Act mentioned.

3. *Short Title.*—This Act may be cited as the Infant Life Protection Act, 1909.

NECESSITOUS MOTHERS (ASSISTANCE) BILL.

THIS Bill was introduced by Mr. Robert Harcourt on March 31st, and is supported by Mr. Pirie, Mr. Chiozza Money, and Mr. Barnes.

ARRANGEMENT OF CLAUSES.

Clause.
1. Optional power to local authorities to levy rate.
2. Terms on which assistance is to be provided.
3. Nature of assistance to be provided.
4. Co-operation with voluntary agencies and delegation of powers.
5. Acceptance of assistance not to disfranchise.
6. Definition.
7. Application to Scotland.
8. Act not to apply to Ireland.
9. Short title.

A BILL to empower Local Authorities to make provision for the Assistance of Necessitous Women in contemplation of and after Childbirth.

Be it enacted by the King's most Excellent Majesty, by and with the advice and consent of the Lords Spiritual and Temporal, and Commons, in this present Parliament assembled, and by the authority of the same, as follows:

1. *Optional Power to Local Authorities to Levy Rate.*—A local authority may provide such food, medical aid, nursing, and other accessories as shall be specified in the regulations hereinafter referred to for the purpose of assisting necessitous women during pregnancy and childbirth, and for a period of time after childbirth; and for this purpose may raise, by a rate, moneys not exceeding in any one year the amount which is produced by a rate of *one penny in the pound* within their area.

2. *Terms on which Assistance is to be Provided.*—The terms upon which such food, medical aid, nursing, and other things may be provided shall be defined in regulations to be made by the local authority and to be approved by the Local Government Board. Such regulations shall make it a condition for being eligible to receive assistance that the woman who applies for it shall comply with the regulations as to ceasing to work for wages for a specified time before and after childbirth, and as to obeying the orders of any doctor, nurse, or other person appointed by the local authority and as to any other matters therein specified.

3. *Nature of Assistance to be Provided.*—If a woman applies to the local authority and agrees to comply with such regulations the local authority may—

(*a*) provide food and any other necessaries for the woman during the latter half of the period of pregnancy;

(*b*) provide medical assistance and nursing in relation to and during the confinement; and

(*c*) provide food and other necessaries for the woman during a period not exceeding six months after childbirth, but they may make it a condition as to supplying food or other necessaries to the mother, that (if capable) she shall feed the infant child at the breast.

4. *Co-operation with Voluntary Agencies, and Delegation of Powers.*—The local authority shall so far as possible co-operate with and utilize all existing or future voluntary agencies, institutions, and societies which have as one of their objects anything which the local authority is empowered to do under this Act, and the local authority may delegate all or any of their powers under this Act to

any such voluntary institution or society, or to any body or bodies of persons or local committees which may be formed (in pursuance of regulations to be made by the Local Government Board) for the purpose of this Act.

5. *Acceptance of Assistance not to Disfranchise.*—The acceptance by a woman of any benefit under this Act shall not deprive her, her husband, or any relation of hers of any franchise, right, or privilege, or subject her or them to any disability.

6. *Definition.*—In this Act, local authority means in London a borough council, and in the rest of England the council of every county and of every county borough.

7. *Application to Scotland.*—In the application of this Act to Scotland, Local Government Board means the Local Government Board for Scotland, and local authority means the council of any county or burgh.

8. *Act not to Apply to Ireland.*—This Act shall not apply to Ireland.

9. *Short Title.*—The Act may be cited as the Necessitous Mothers (Assistance) Act, 1909.

OATHS BILL.

[*As Amended by Standing Committee B.*]

MEMORANDUM.

BY Section 5 of the Oaths Act, 1888, it is open to a person to whom an oath is administered if he so desires to swear with uplifted hand in the form and manner in which an oath is usually administered in Scotland. Under this Act, however, judges, magistrates, coroners, and other persons do not consider themselves justified in suggesting this form of oath to the witness, jury, or deponent, and it is a question whether the oath ought to be so administered unless the witness or deponent voluntarily requests it to be done. Consequently, the old form of kissing the Book, to which there are many objections, still prevails.

The object of this Bill is to endeavour to make the administration of the oath by uplifted hand universal, and to enable the court to administer it in this form unless the person about to take the oath voluntarily objects thereto.

A BILL [as amended by Standing Committee B] to Amend the Law as to Oaths.

Be it enacted by the King's Most Excellent Majesty, by and with the advice and consent of the Lords Spiritual and Temporal, and Commons, in this present Parliament assembled, and by the authority of the same, as follows:

1. *Short Title.*—This Act may be cited for all purposes as the Oaths Act, 1909, and the Oaths Act, 1888, and this Act may be cited together as the Oaths Acts, 1888 and 1909.

2. *Manner and Administration of Oaths to Witnesses by Courts.*—(1) Any oath may be administered and taken in the form and manner described in the schedule hereto.

(2) The officer shall (unless the person about to take the oath voluntarily objects thereto, or is physically incapable of so taking the oath) administer the oath in such form and manner without question.

3. *Definition.*—In this Act the word "officer" shall mean and include any and every person duly authorized to administer oaths.

4.—*Commencement and Extent.*—(1) This Act shall come into operation on the first day of October nineteen hundred and nine.

(2) This Act shall not apply to Scotland.

SCHEDULE.

FORM AND MANNER OF ADMINISTERING OATH.

The officer administering the oath shall address the person taking the oath in the following form: "You swear by Almighty God that," and then proceed with the words of the oath prescribed by law, omitting any further words of imprecation or calling to witness; and the person taking the oath shall, with uplifted hand, say "I do."

If the oath is an oath which is customarily taken by the words of the oath being read or repeated after the officer administering it, the words shall be read or repeated with uplifted hand in the form following: "I do swear by Almighty God that," and then proceed with the words of the oath prescribed by law, omitting any further words of imprecation or calling to witness.

Naval and Military Appointments.

EXCHANGE.

The charge for inserting notices respecting Exchanges in the Army Medical Department is 3s. 6d., which should be forwarded in stamps or post office order with the notice, not later than Wednesday morning, in order to ensure insertion in the current issue.

EXCHANGE wanted by senior Lieutenant-Colonel due for India beginning of September. Address, Lieutenant-Colonel Simpson, R.A.M. College, or by wire c.o. Jaspage, London.

ROYAL NAVY MEDICAL SERVICE.

THE following appointments have been made at the Admiralty: Staff Surgeon J. VERDON to the *Kinsha*, March 4th; Surgeon G. L. BUCKERIDGE to the *Astraea*, March 4th; Staff Surgeon E. FOLLIOTT and Surgeon R. KENNEDY, M.B., to the *Forte*, April 20th; Surgeon G. A. BRADSHAW to the *Hindustan*, April 20th; Fleet Surgeon G. T. COLLINGWOOD, to the *Racer*, additional, for the Royal Naval College, Osborne; Fleet Surgeon J. SUGRUE, M.D., to the *President*, additional, for the Royal Marine Recruiting Head Quarters; Fleet Surgeon J. L. THOMAS to the *Eagle*; Fleet Surgeon W. E. HOME, M.D., to the *Daedalus*, April 20th; Fleet Surgeon P. M. MAY to the *Vengeance*, April 20th, and to the *Trafalgar* on its becoming the parent ship, undated; Fleet Surgeon C. J. MANSFIELD, M.D., and Surgeon G. D. BATEMAN to the *Formidable*, on commissioning, April 20th; Staff Surgeon C. B. FAIRBANK, to the *Victorious*, on recommissioning, April 20th; Surgeon E. R. L. THOMAS to the *Crescent*, additional, for the *Edgar*, temporarily, April 15th.

ARMY MEDICAL SERVICE.

ROYAL ARMY MEDICAL CORPS.

SURGEON-MAJOR S. G. MOORES, from the Scots Guards, to be Major, April 17th. He was appointed to the Scots Guards, November 16th, 1901. He has a medal with clasp for services with the Chitral Relief Force in 1895, and for the South African war in 1899-1902 he was promoted to be Major, and received the Queen's medal with six clasps and the King's medal with two clasps.

It is announced that Major C. C. FLEMING, D.S.O., M.B., is to take up the appointment of Instructor at the Training School at the Royal Army Medical School of Instruction at Aldershot on June 13th, vice Major J. D. Ferguson, D.S.O.

Captain T. C. LUCAS, M.B., who is serving in India, is appointed Surgeon to His Excellency the Governor of Bombay, from February 1st.

INDIAN MEDICAL SERVICE.

LIEUTENANT-COLONEL R. W. S. LYONS, M.D., Bombay, is promoted to be Colonel, from January 13th. He entered the Bombay Medical Department as Surgeon, April 1st, 1882, and became Lieutenant-Colonel, April 1st, 1902.

SPECIAL RESERVE.

ROYAL ARMY MEDICAL CORPS.

CAPTAIN H. E. DALBY, having assented to be transferred, is appointed an Officer of the Special Reserve of Officers, retaining the rank and seniority which he held in the Militia, September 2nd, 1908.

MILITIA.

HONORARY SURGEON-MAJOR E. F. NELSON, M.D., 5th Battalion the Royal Irish Rifles, resigns his commission, retaining his rank and uniform, June 27th, 1908.

TERRITORIAL FORCE.

ROYAL ENGINEERS.

SURGEON-LIEUTENANT J. H. RHODES, 2nd London Divisional Engineers, resigns his commission, March 11th.

INFANTRY.

Honorary Assistant Surgeon J. R. HUGHES, 4th Battalion the Royal Welsh Fusiliers, is retired, under the conditions of para. 59, Territorial Force Regulations, with permission to retain his rank and uniform, April 1st.

ROYAL ARMY MEDICAL CORPS.

Second Northern General Hospital.—Surgeon-Captain A. L. WHITEHEAD, M.B., from the 1st West Riding Brigade Royal Field Artillery, to be Captain and to be an officer whose services will be available on mobilization, retaining his seniority as in the Royal Field Artillery, Territorial Force, February 25th, 1909.

For Attachment to Units other than Medical Units.—Major J. W. ELLIS to be Lieutenant-Colonel, June 15th, 1908. THOMAS H. LIVINGSTONE, M.D., F.R.C.S.Edin., to be Lieutenant, March 1st, 1909.

CHANGES OF STATIONS.

THE following changes of stations amongst the officers of the Army Medical Service have been officially reported to have taken place during March:

	FROM	TO
Colonel S. C. B. Robinson	Ahmednagar ...	Jubbulpore.
Lieut.-Col. W. Heffernan	Wynberg ...	Capetown.
" J. H. A. Rhodes	Malta	Tralee.
" F. H. Treherne, F.R.C.S. Edin.	Ambala ...	Aldershot.
" A. E. Tate	War Office ...	Ambala.
" R. J. Geddes, D.S.O., M.B.	Woking ...	Jubbulpore.
" M. O'D. Braddell, M.B. ...	Golden Hill ...	Lahore.
" J. J. C. Donnet	Kamptee ...	Belfast.
" J. Maher	— ...	Potchefstroom.
" A. E. Morris, M.D. ...	Jubbulpore ...	Kamptee.
" R. H. Hall, M.D.	London ...	Colchester.
" M. O'Halloran, M.D. ...	Pretoria ...	Capetown.
" J. H. Daly	Crete	Cork.
" W. H. Starr	Bangalore ...	Shwebo.
" T. G. Lavie	Meiktila ...	Newbridge.
" J. Will, M.B.	East Africa ..	Cork.
Major F. J. Morgan	Netley	Barrackpore.
" C. H. Hale, D.S.O....	Secunderabad	Strensall.
" J. C. Morgan	Naini Tal ...	Fermoy.
" S. F. Clark, M.B.	Bloemfontein .	Middelburg, Cape Colony.

		FROM	TO
Major	J. Girvin	London Dist.	Hyderabad.
,,	C. W. R. Healey	Tralee	Kamptee
,,	F. W. Hardy, M.B.	Egypt	Golden Hill.
,,	C. W. Duggan, M.B.	Shwebo	Bhamo.
,,	H. P. Johnson	—	Bloemfontein.
,,	J. G. McNaught, M.D.	Wynberg	Pretoria.
,,	E. W. Slayter, M.B.	Bangalore	Secunderabad.
,,	A. G. Thompson, M.B.	Cardiff	Ferozepore.
,,	C. M. Fleury	Malta	Tidworth.
,,	G. Dansey-Browning	—	Colchester.
,,	J. E. Carter, M.B.	Simonstown	Pretoria.
,,	John M. Buist, M.B.	Pretoria	Wynberg.
,,	A. E. Milner	St. Thomas Mt.	London Dist.
,,	F. E. Gunter, M.B.	Curragh	Lucknow.
,,	M. P. Corkery	Woolwich	Jhansi.
Captain	H. Simson	R.A.M. Coll.	Millbank.
,,	H. Ensor, D.S.O., M.B.	,,	Egypt. Army.
,,	L. N. LLoyd, D.S.O.	Maidstone	London.
,,	E. P. Connolly	Curragh	Cardiff.
,,	H. S. Roch	Queenstown	Leeds.
,,	P. S. O'Reilly	Cosham	Sitapur.
,,	C. S. Smith, M.B.	Newbridge	Curragh.
,,	W. C. Croly	R.A.M. Coll.	Cork.
,,	J. G. Foster, M.B.	Londonderry	Curragh.
,,	B. B. Burke	Devonport	Fort Maher.
,,	R. L. Popham	Dublin	Curragh.
,,	C. D. Myles, M.B.	Jhansi	Dublin.
,,	W. L. Steele	Lucknow	Penally.
,,	M. W. Falkner	Chester	Curragh.
,,	A. H. McN. Mitchell	Devonport	Stamford.
,,	J. B. Clarke, M.B.	Pembroke Dk.	Edinburgh.
,,	M. C. Beatty, M.B.	Deolalee	Belfast.
,,	T. F. Ritchie, M.B.	Clogheen	Fermoy.
,,	W. J. S. Harvey	—	Cork.
,,	J. McKenzie, M.B.	Sitapur	Aldershot.
,,	H. J. Crossley	Aldershot	Bury.
,,	J. M. H. Conway, F.R.C.S.Ire.	Aden	Richmond.
,,	W. W. Browne	Curragh	Dublin.
,,	R. Rutherford, M.B.	Edinburgh	Perth.
,,	N. E. J. Harding, M.B.	Inverness	Aberdeen.
,,	J. G. Bell, M.B.	Lahore	W. Command.
,,	R. H. Bridges	Bangalore	Aldershot.
,,	J. A. W. Webster	Poona	E. Command.
,,	F. C. Lambert	Potchefstroom	Cape Town.
,,	R. C. Wilmot	—	IrishComm'nd
,,	H. B. Kelly, M.B.	Bangalore	,,
,,	E. M. Pennefather	Maymyo	,,
,,	D. Ahern	Karachi	Cork.
	J. H. Duguid, M.B.	Aberdeen	Berwick-on-Tweed.
,,	H. T. Stack, M.B.	Sitapur	Cork.
,,	T. S. Dudding	Bloemfontein	W. Command.
,,	O. Ievers, M.B.	Middelburg, Cape Colony	Pretoria.
,,	H. H. J. Fawcett	Harrismith	Simonstown.
,,	S. E. Lewis, M.B.	Standerton	,,
,,	N. E. Dunkerton	Potchefstroom	Pretoria.
,,	P. J. Hanafin	Standerton	Wynberg.
,,	H. W. Russell, M.D.	Jamaica	Ashton.
,,	A. E. S. Irvine	Middelburg, Transvaal	Potchefstroom
,,	C. F. White, M.B.	Lucknow	Darjeeling.
,,	F. C. Sampson, M.B.	Middelburg, Cape Colony	Bloemfontein.
Lieutenant	A. S. Littlejohns	—	Pretoria.
,,	A. S. Williams	Lebong	Dinapore.
,,	M. G. Dill, M.B.	Egypt. Army	E. Command.
,,	A. H. Bond	Bhamo	Maymyo.
,,	T. W. O. Sexton	—	Pretoria.
,,	W. H. Forsyth, M.B.	—	Middelburg, Cape Colony.
,,	A. C. Amy, M.B.	R.A.M. Coll.	Ranikhet.
,,	W. Mitchell, M.B.	Rawal Pindi	Ambala.
,,	A. C. Vidal	Golden Hill	Portland.
,,	J. J. O'Keeffe, M.B.	Quetta	Hyderabad.
,,	A. Fortescue, M.B.	Winchester	Netley.
,,	F. H. M. Chapman	Tidworth	Coventry.
,,	F. Casement, M.B.	Sitapur	Lucknow.
,,	G. Petit	Tidworth	Birmingham.
,,	F. T. Dowling, M.B.	Bodmin	Bull Point.
,,	H. H. Blake, M.B.	Edinburgh	Berwick-on-Tweed.
,,	W. J. Dunn, M.B.	Colchester	Mill Hill.
,,	M. Leckie	Shoeburyness	Chatham.
,,	W. H. S. Burney	Chatham	Egypt. Army.
,,	T. B. Nicholls, M.B.	Cosham	Winchester.
,,	J. B. Jones, M.B.	Belfast	Londonderry.

Hospitals and Asylums.

ROYAL VICTORIA HOSPITAL, BELFAST.

THE 116th annual meeting of this institution was held at the hospital on March 31st. The Lord Mayor, Sir Robert Anderson, occupied the chair. The medical and surgical report was read by Dr. R. J. Johnstone, honorary secretary of the visiting staff. There had been 1,375 new medical and 1,961 new surgical cases. Of the 195 deaths, 26 had been admitted moribund, and of the remainder, 95 were medical and 77 surgical; 1,427 operations had been performed, with 66 deaths, giving a mortality of 4.62 per cent.; 30,041 new cases had been treated in the out-patient department. Dr. Johnstone, in moving the adoption, urged the necessity of the use of the yet unopened wards and of larger Roentgen-ray accommodation.

THE ROYAL BOSCOMBE AND WEST HANTS HOSPITAL.

A NEW out-patient department at the West Hants Hospital at Boscombe, Bournemouth, was formally opened by Princess Alexandra of Teck on April 3rd, a tablet to the late Sir Frederick Wills, its president from 1901 to 1909, being unveiled on the same occasion. The new building is part of a pavilion scheme which has been in progress for some years, and will be complete when an administrative block and nurses' quarter have been erected. Except that one of the two rooms intended for isolation purposes is at present used as an operating theatre, the ward part of the scheme is complete. It provides thirty-four beds and six cots. Compared with this, the out-patient work seems designed on an ambitious scale. The building devoted to it is a handsome single-story erection in Georgian style, with entrances for male and female patients respectively on each side of a porter's lodge. These give access to square lobbies, whence the patients pass into a large waiting-room 56 ft. by 23 ft. Leading out of the entrance lobbies are lavatories. Communicating with the entrance hall are medical and surgical consulting rooms, each with its own examining room; a minor operation room with two recovery rooms attached, and a dental department consisting of three rooms. In addition, there is an ophthalmic consulting room with two dark rooms and an electrical department. From the consulting rooms the patients pass by a separate passage to a dispensary waiting room, and thence out into the street. Finally, a refreshment bar is to be found on one side of the waiting-hall. Out-patients at this institution are admitted by tickets which entitle them to free attendance as out-patients for six weeks; while for each supply of medicine or bandage they pay 2d. According to the rules, no person in receipt of Poor Law relief can be treated as an out-patient, nor, except on the recommendation of a medical practitioner, any one who is in receipt of an income of over 20s. a week, or who is a member of a family with a collective weekly income exceeding 30s.

GREAT NORTHERN CENTRAL HOSPITAL.

THE report submitted at the annual meeting of the Great Northern Central Hospital, on March 18th, showed that the cost per bed per year had been reduced by £2 4s. 10d., as compared with the previous year. The new children's ward provided by the Ladies' Association was now open, and the convalescent home, a gift from Mr. Francis Reckitt, was expected to be ready in July. Financially the net outcome of the year's work was a deficit of £4,643, raising the total indebtedness to £10,304. In default of speedy material assistance in getting rid of that debt a ward must be closed. Stress was laid by one speaker on the extreme disproportion between the support accorded to the hospital by the Borough of Islington in which it lies and the benefits received.

ILKLEY HOSPITAL AND CONVALESCENT HOME.

THE annual meeting of the subscribers to this hospital took place on March 31st. The report stated that the admissions last year (including 154 renewals) numbered 693, bringing the total number of patients admitted since the hospital was erected in 1861 up to 37,322. Dr. T. Browne Hearder stated that of the admissions 517, or over 96 per cent., were either cured or improved, 3 per cent. were no better, and less than 1 per cent. were worse.

Vital Statistics.

VITAL STATISTICS OF LONDON DURING THE FIRST QUARTER OF 1909.

IN the accompanying table will be found summarized the vital statistics of the City of London and of the metropolitan boroughs, based upon the Registrar-General's returns for the first quarter of the year. The mortality figures in the table relate to the deaths of persons actually belonging to the various boroughs, and are obtained by distributing the deaths occurring in institutions among the boroughs in which the deceased persons had previously resided. The 30,493 births registered in London during the three months under notice were equal to an annual rate of 25.3 per 1,000 of the population, estimated at 4,833,938 persons in the middle of the year; in the corresponding quarters of the three preceding years the birth-rates were 27.8, 26.7, and 26.9 per 1,000, the average rate for the first quarter in the ten years 1899–1908 being 29.1 per 1,000. The birth-rates last quarter ranged from 13.0 in the City of London, 14.0 in Hampstead, 15.8 in the City of Westminster, 18.3 in Kensington, 18.7 in Stoke Newington, and 19.5 in Chelsea, to 31.2 in Bethnal Green, 31.8 in Stepney, 32.3 in Bermondsey, 32.7 in Shoreditch, 33.4 in St. Marylebone, and 37.2 in Finsbury.

During last quarter 22,873 deaths of London residents were registered, equal to an annual rate of 19.0 per 1,000, against 16.0, 18.5, and 17.0 in the first quarters of the three preceding years; for the corresponding period of the ten years 1899-1908 the average death-rate was 18.6 per 1,000. Among the several boroughs the death-rates last quarter ranged from 12.3 in Hampstead, 13.1 in Lewisham, 15.0 in Woolwich, 15.7 in Fulham, 16.3 in Greenwich, and 16.4 in Stoke Newington, to 22.3 in Bethnal Green, 23.0 in Southwark, 24.9 in the City of London, 25.4 in Shoreditch, 26.0 in Finsbury, and 26.3 in Bermondsey.

The 22,873 deaths from all causes last quarter included 2,084 which were referred to the principal infectious diseases; of these 1,147 resulted from measles, 109 from scarlet fever, 230 from diphtheria, 364 from whooping-cough, 59 from enteric fever, 174 from diarrhoea, and 1 from small-pox. These 2,084 deaths were equal to an annual rate of 1.72 per 1,000, or 0.13 per 1,000 more than the average rate from the same diseases in the ten preceding first quarters. The lowest death-rates from these diseases last quarter were 0.59 in Hampstead, 0.66 in the City of London, 0.67 in Holborn, 0.71 in Lewisham, 0.89 in the City of Westminster, and 0.96 in Paddington, and the highest rates were 2.24 in Poplar, 2.34 in Deptford, 2.44 in Bethnal Green, 2.49 in Southwark, 3.21 in Shoreditch, and 5.46 in Bermondsey. The greatest proportional mor-

Analysis of the Vital Statistics of the Metropolitan Boroughs and of the City of London after Distribution of Deaths occurring in Public Institutions during the First Quarter of 1909.

BOROUGHS.	Estimated Population middle of 1909.	Births.	Deaths.	Annual Rate per 1,000 Living. Births.	Deaths.	Principal Infectious Diseases.	Deaths from Principal Infectious Diseases.	Small-pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping-cough.	Typhus.	Enteric Fever.	Ill-defined Pyrexia.	Diarrhoea.	Phthisis.	Deaths of Children Under 1 Year of Age to 1,000 Births.
COUNTY OF LONDON ...	4,833,938	30,493	22,873	25.3	19.0	1.72	2,084	1	1,147	109	230	364	—	59	—	174	1,992	112
Paddington	151,955	770	662	20.3	17.5	0.96	36	—	9	4	1	16	—	—	—	6	44	121
Kensington	183,683	837	888	18.3	19.4	1.26	58	—	23	2	9	11	—	7	—	6	67	115
Hammersmith ...	125,704	748	599	23.9	19.1	1.21	38	—	9	2	7	14	—	2	—	4	37	111
Fulham	176,406	1,086	691	24.7	15.7	1.54	68	—	19	1	20	21	—	—	—	7	61	103
Chelsea	75,249	366	395	19.5	21.1	1.75	33	—	16	3	6	4	—	1	—	3	37	137
City of Westminster	168,883	664	746	15.8	17.7	0.89	37	1	13	4	4	9	—	2	—	4	78	101
St. Marylebone ...	126,027	1,051	646	33.4	20.6	1.22	38	—	22	3	3	7	—	—	—	3	57	72
Hampstead	94,185	328	289	14.0	12.3	0.59	14	—	3	1	1	7	—	1	—	1	17	88
St. Pancras	237,422	1,361	1,212	23.0	20.5	1.98	117	—	75	8	12	11	—	2	—	9	112	118
Islington	351,202	2,140	1,676	24.4	19.1	1.74	152	—	89	9	12	31	—	5	—	6	119	111
Stoke Newington ...	54,423	254	223	18.7	16.4	1.03	14	—	5	2	—	5	—	1	—	1	14	79
Hackney	237,601	1,446	989	24.4	16.7	1.23	73	—	31	3	8	15	—	4	—	12	98	105
Holborn	53,802	377	262	28.1	19.5	0.67	9	—	4	2	—	2	—	1	—	—	35	58
Finsbury	95,289	883	618	37.2	26.0	2.12	50	—	22	4	3	17	—	—	—	4	77	121
City of London ...	18,193	59	113	13.0	24.9	0.66	3	—	2	—	—	1	—	—	—	—	11	85
Shoreditch	114,802	935	728	32.7	25.4	3.21	92	—	45	4	6	27	—	4	—	6	66	133
Bethnal Green ...	131,316	1,023	730	31.2	22.3	2.44	80	—	49	8	6	10	—	1	—	6	71	134
Stepney	312,525	2,479	1,483	31.8	19.0	1.96	153	—	99	8	21	8	—	1	—	16	154	111
Poplar	171,965	1,279	862	29.8	20.1	2.24	96	—	48	8	7	11	—	7	—	15	71	135
Southwark	211,125	1,493	1,212	28.4	23.0	2.49	131	—	87	3	12	11	—	2	—	16	120	130
Bermondsey	127,569	1,026	835	32.3	26.3	5.46	174	—	150	3	2	14	—	2	—	3	72	155
Lambeth	324,188	2,231	1,595	27.6	19.7	1.48	119	—	50	4	20	31	—	3	—	11	144	108
Battersea	186,036	1,095	823	23.6	17.7	1.95	90	—	42	3	10	29	—	2	—	4	65	126
Wandsworth	297,646	1,789	1,237	24.1	16.7	1.56	115	—	59	6	13	28	—	1	—	8	87	105
Camberwell	283,022	1,671	1,340	23.7	19.0	1.54	108	—	65	3	18	11	—	4	—	7	103	107
Deptford	118,583	817	546	27.6	18.5	2.34	69	—	52	2	8	4	—	2	—	1	45	109
Greenwich	111,014	644	450	23.3	16.3	1.37	38	—	30	1	—	4	—	—	—	3	42	107
Lewisham	160,749	861	524	21.5	13.1	0.71	29	—	5	3	6	5	—	2	—	8	36	82
Woolwich	133,374	780	499	23.5	15.0	1.50	50	—	24	5	15	—	—	2	—	4	52	90

tality from measles was recorded in St. Pancras, Shoreditch, Bethnal Green, Stepney, Southwark, Bermondsey, and Deptford; from scarlet fever in Chelsea, Stoke Newington, Holborn, Finsbury, Bethnal Green, Poplar, and Woolwich; from diphtheria in Fulham, Chelsea, Stepney, Lambeth, Camberwell, Deptford, and Woolwich; from whooping-cough in Paddington, Hammersmith, Fulham, Finsbury, Shoreditch, Bermondsey, and Battersea; from "fever" in Kensington, Shoreditch, Poplar, Stoke Newington, Hackney, Holborn, and Deptford; and from diarrhoea in Hackney, Shoreditch, Bethnal Green, Stepney, Poplar, Southwark, and Lewisham. The fatal case of small-pox belonged to the City of Westminster.

During the three months ending March last the deaths from phthisis among persons belonging to London numbered 1,992, and were equal to an annual rate of 1.65 per 1,000, against 1.51, 1.73, and 1.56 in the first quarters of the three preceding years. The death-rates from this disease last quarter ranged from 0.72 in Hampstead, 0.90 in Lewisham, 1.03 in Stoke Newington, 1.16 in Paddington, 1.17 in Wandsworth, and 1.18 in Hammersmith to 2.17 in Bethnal Green, 2.26 in Bermondsey, 2.28 in Southwark, 2.31 in Shoreditch, 2.43 in the City of London, 2.61 in Holborn, and 3.24 in Finsbury.

Infant mortality, measured by the proportion of deaths among children under 1 year of age to registered births, was equal to 112 per 1,000 last quarter, against 115, 132, and 110 in the corresponding quarters of the three preceding years. The lowest rates last quarter were recorded in St. Marylebone, Hampstead, Stoke Newington, Holborn, the City of London, Lewisham, and Woolwich; and the highest rates in Chelsea, Shoreditch, Bethnal Green, Poplar, Bermondsey, and Southwark.

HEALTH OF ENGLISH TOWNS.

IN seventy-six of the largest English towns, including London, 8,524 births and 5,397 deaths were registered during the week ending Saturday last, April 17th. The annual rate of mortality in these towns, which had been 19.8, 17.9, and 17.0 per 1,000 in the three preceding weeks, rose again to 17.1 last week. The rates in the several towns ranged from 8.3 in King's Norton, 8.9 in Leyton, 10.4 in Hornsey, 10.7 in Willesden, 11.1 in West Bromwich and in West Hartlepool, 11.3 in Derby, and 11.5 in East Ham, to 22.3 in Swansea, 22.4 in Salford and in Preston, 23.0 in St. Helens, 23.3 in Oldham, 24.8 in Bootle, 27.1 in Tynemouth, and 28.3 in Great Yarmouth. In London the rate of mortality was 17.3 per 1,000, while it averaged 17.0 in the seventy-five other large towns. The death-rate from the principal infectious diseases averaged 1.9 per 1,000 in the seventy-six towns; in London this death-rate was equal to 2.1 per 1,000, while among the seventy-five other large towns the death-rates from these diseases ranged upwards to 3.5 in Preston and in Sheffield, 3.7 in Smethwick, 5.3 in Bootle, 6.5 in Warrington, and 6.6 in St. Helens. Measles caused a death-rate of 2.0 in Liverpool, 2.1 in East Ham and in Walsall, 2.2 in Nottingham, 2.3 in Wigan, 2.5 in Devonport, 3.0 in Sheffield, 3.6 in Warrington, 3.7 in Smethwick, 5.3 in Bootle, and 6.0 in St. Helens; scarlet fever of 1.4 in Warrington; diphtheria of 1.2 in Rhondda; whooping-cough of 1.3 in Croydon, 2.6 in Preston, and 2.9 in Grimsby; and diarrhoea of 1.2 in Aston Manor and 1.5 in Burnley. The mortality from enteric fever showed no marked excess in any of the large towns, and no fatal case of small-pox was registered during the week. The number of scarlet fever patients under treatment in the Metropolitan Asylums Hospitals and the London Fever Hospital at the end of the week was 2,294, against 2,571, 2,462, and 2,418 at the end of the three preceding weeks; 244 new cases were admitted during the week, against 327, 273, and 256 in the three preceding weeks.

HEALTH OF SCOTTISH TOWNS.

DURING the week ending Saturday last, April 17th, 1,041 births and 656 deaths were registered in eight of the principal Scottish towns. The annual rate of mortality in these towns, which had declined from 21.6 to 17.7 per 1,000 in the five preceding weeks, rose again to 18.4 per 1,000 last week, and was 1.3 per 1,000 above the mean rate during the same period in the seventy-six large English towns. Among these Scottish towns the death-rates ranged from 8.5 in Leith and 17.5 in Aberdeen to 19.4 in Dundee and 22.0 in Perth. The death-rate from the principal infectious diseases averaged 2.7 per 1,000 in these eight towns, the highest rates being recorded in Glasgow and Paisley. The 323 deaths registered in Glasgow included 4 which were referred to scarlet fever, 4 to diphtheria, 44 to whooping-cough, 4 to enteric fever, and 11 to diarrhoea. Five fatal cases of whooping-cough were recorded in Edinburgh; 5 of diarrhoea in Aberdeen; 4 of measles, 2 of diphtheria, and 2 of whooping-cough in Paisley; and 4 of whooping-cough in Greenock and 2 in Perth.

HEALTH OF IRISH TOWNS.

DURING the week ending Saturday, April 10th, 589 births and 534 deaths were registered in the twenty-two principal urban districts of Ireland, as against 689 births and 531 deaths in the preceding period. The annual death-rate in these districts, which had been 26.1, 25.1, and 24.2 per 1,000 in the three preceding weeks, rose to 24.4 per 1,000 in the week under notice, this figure being 7.4 per 1,000 higher than the mean annual death-rate in the seventy-six English towns for the corresponding period. The figures in Dublin and Belfast were 25.5 and 27.0 respectively, those in other districts ranging from 5.3 in Tralee and 9.7 in Waterford to 38.3 in Ballymena and 40.1 in Newtownards, while Cork stood at 22.6, Londonderry at 18.1, and Limerick at 19.1. The zymotic death-rate in the twenty-two districts averaged 1.4 per 1,000, as against 2.0 per 1,000 in the preceding period.

During the week ending Saturday, April 17th, 650 births and 580 deaths were registered in the twenty-two principal urban districts of Ireland, as against 589 births and 534 deaths in the preceding period. The annual death-rate in these districts, which had been 25.1, 24.2, and 24.4 per 1,000 in the three preceding weeks, rose to 26.5 per 1,000 in the week under notice, this figure being 9.4 per 1,000 higher than the mean annual death-rate in the seventy-six English towns for the corresponding period. The figures in Dublin and Belfast were 27.7 and 27.8 respectively, those in other districts ranging from 8.4 in Newry and 9.6 in Sligo to 34.4 in Armagh and 48.7 in Lurgan; while Cork stood at 30.1, Londonderry at 25.4, Limerick at 20.5, and Waterford at 23.4. The zymotic death-rate in the twenty-two districts averaged 1.6 per 1,000, as against 1.4 per 1,000 in the preceding period.

Vacancies and Appointments.

This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column, advertisements must be received not later than the first post on Wednesday morning.

VACANCIES.

BIRMINGHAM AND MIDLAND FREE HOSPITAL FOR CHILDREN. — (1) Resident Medical Officer. (2) Resident Surgical Officer. Salary, £80 per annum each.

BIRMINGHAM AND MIDLAND HOSPITAL FOR SKIN AND URINARY DISEASES.—Clinical Assistant. Honorarium at the rate of 52 guineas a year.

BURY INFIRMARY.—Junior House-Surgeon. Salary, £80 per annum, rising to £90 after six months.

CANTERBURY: KENT AND CANTERBURY HOSPITAL.—Assistant House-Surgeon. Salary, £60 per annum.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST, Victoria Park, E.—House-Physician (male). Salary at the rate of £75 per annum.

DUDLEY: GUEST HOSPITAL.—Assistant House-Surgeon. Salary, £60 per annum.

EAST LONDON HOSPITAL FOR CHILDREN, Shadwell, E.—(1) House-Surgeon, male. (2) Second Medical Officer, male, to the Casualty Department. Salary at the rate of £70 and £45 per annum respectively.

EVELINA HOSPITAL FOR SICK CHILDREN, Southwark Bridge Road, S.E. — House-Physician. Salary at the rate of £60 per annum.

FARRINGDON GENERAL DISPENSARY AND LYING-IN CHARITY, E.C.—Resident Medical Officer. Salary, £100 per annum.

FOLKESTONE: VICTORIA HOSPITAL.—House-Surgeon. Salary, £130 per annum.

GLASGOW ROYAL ASYLUM.—Junior Assistant Physician. Salary, £150 per annum.

HOLLAND (LINCS) COUNTY COUNCIL EDUCATION COMMITTEE.—County School Medical Officer. Salary, £250 per annum and £50 travelling expenses.

HUDDERSFIELD INFIRMARY.—(1) House-Surgeon, (2) Junior House-Surgeon (males). Salary, £100 and £80 per annum respectively.

ITALIAN HOSPITAL, Queen Square, W.C.—House-Surgeon. Salary at the rate of £60 per annum.

JERSEY GENERAL DISPENSARY AND INFIRMARY.—Resident Medical Officer. Salary, £100 per annum.

LINCOLN MENTAL HOSPITAL.—Assistant Medical Officer. Salary, £150 per annum.

LIVERPOOL DISPENSARIES.—Assistant Surgeon. Salary, £100 per annum.

MIDDLESEX COUNTY ASYLUM, Napsbury.—Fourth Assistant Medical Officer. Salary, £160 per annum.

MOUNT VERNON HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Hampstead.—Junior Resident Medical Officer. Honorarium, £50 per annum.

NORTH STAFFORDSHIRE INFIRMARY, Hartshill.—Junior House-Surgeon (male). Salary, £50 per annum.

NORWICH: NORFOLK AND NORWICH HOSPITAL.—Assistant House-Surgeon, male. Honorarium, £20 for six months.

PORTSMOUTH PARISH.—Second Assistant Resident Medical Officer for the Workhouse Infirmary, Workhouse, and Children's Home. Salary, £100 per annum.

PRINCE OF WALES'S GENERAL HOSPITAL, Tottenham.—(1) House-Surgeon, (2) House-Physician, (3) Junior House-Surgeon, (4) Junior House-Physician. Salary at the rate of £75 per annum for (1) and (2), and £40 per annum for (3) and (4).

ROYAL WESTMINSTER OPHTHALMIC HOSPITAL, King William Street, W.C.—House-Surgeon. Salary, £25 for six months.

SEAMEN'S HOSPITAL, Greenwich.—Two House-Physicians. Salary at the rate of £50 per annum each.

SOCIETY OF APOTHECARIES OF LONDON.—Examiner in Surgery.

SOUTHAMPTON: ROYAL SOUTH HANTS AND SOUTHAMPTON HOSPITAL.—House-Physician. Salary, £100 per annum.

WAKEFIELD: CLAYTON HOSPITAL. — Junior House-Surgeon. Salary, £80 per annum.

WAKEFIELD: WEST RIDING ASYLUM.—Assistant Medical Officer to act as locum tenens. Salary, 3 guineas per week.

WEST LONDON HOSPITAL, Hammersmith Road, W.—(1) Physician, (2) Assistant Physician.

YORK DISPENSARY.—Resident Medical Officer. Salary, £130 per annum.

CERTIFYING FACTORY SURGEONS.—The Chief Inspector of Factories announces vacancies at Market Bosworth, co. Leicester; Carney, co. Sligo; and Spennymoor, co. Durham.

APPOINTMENTS.

BEATTIE, A. J., M.B., Ch.B.Edin., Certifying Factory Surgeon for the Callander District, co. Perth.

BLOMFIELD, S. B., L.S.A., District Medical Officer of the Battle Union.

BROCKWELL, J. B. C., M.R.C.S., L.R.C.P., Medical Officer of Health, Walton-on-the-Naze Urban District.

DAVIES, J. L., M.R.C.S., L.R.C.P., Certifying Factory Surgeon for the Newport District, co. Monmouth.

FIELDEN, W. E., M.D.Lond., Certifying Factory Surgeon for the Staplehurst District, co. Kent, and District Medical Officer of the Maidstone Union.

FRENCH, Margaret Douglas, M.B., B.S.Durh., Junior Assistant Medical Officer, North Riding Asylum, Clifton, York.

GAMBLE, A. G., L.M.S.S.A., District Medical Officer of the Halifax Union.

GIBBS, S. R., M.R.C.S., L.R.C.P., District Medical Officer of the Barnstaple Union

HAWLEY, F. H., M.R.C.S.Eng., District Medical Officer of the Cheadle Union.

JOSCELYNE, A. E., M.R.C.S., L.R.C.P., Certifying Factory Surgeon for the Taunton District, co. Somerset.

MENZIES, G. H., M.B., Ch.B.Edin., Medical Officer of Health, Rawmarsh Urban District.

PALMER, A. H., M.R.C.S., L.R.C.P., District Medical Officer of the Burton-upon-Trent Union.

PRITCHETT, G. W. M., M.R.C.S., L.R.C.P., District Medical Officer of the Liskeard Union.

RING, C. A. E., L.R.C.P.and S.Edin., L.F.P.S.Glas., District Medical Officer of the Rugby Union.

ROBERTS, W. R. S., M.B., Ch.B.Birm., Medical Officer of Health, Ongar Rural District Council.

RORIE, David, M.D.Edin., Ch.M., Medical Officer to St. Mary's College, Blairs, Aberdeen.

WILLETT, James H., M.D., Ch.B., Honorary District Medical Officer of No. 7 District of the Liverpool Maternity Hospital and Ladies' Charity.

WILSON, Horace, B.S., M.B.Lond., M.R.C.S., L.R.C.P., Clinical Assistant to St. Peter's Hospital for Urinary Diseases.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in post-office orders or stamps with the notice not later than Wednesday morning, in order to ensure insertion in the current issue.

BIRTHS.

BIRD.—April 15th, at Old Hayes, Sidmouth, the wife of Arthur C. Bird, M.R.C.S.Eng., L.R.C.P.Lond., of a daughter.

BLICK.—On April 10th, at Heathwood, Dacres Road, Forest Hill, S.E., the wife of Graham Blick, M.D.Dunelm., J.P., of a son.

BURGESS.—On April 14th, at Milverton Lodge, Victoria Park, Manchester, the wife of Arthur H. Burgess, of twin sons.

RYAN.—At 22, Lockyer Street, Plymouth, the wife of Dr. Richard P. Ryan, of a daughter.

DEATHS.

FOSTER.—On the 19th inst., at 53, Loraine Road, Holloway, N., Dr. John Edward Foster, aged 46 years.

TAYLOR.—On April 13th, at his residence, Beechwood Hall, Mapperley Nottingham, Charles Bell Taylor, M.D.Edin., F.R.C.S.E.

DIARY FOR THE WEEK.

MONDAY.

MEDICAL SOCIETY OF LONDON, 11, Chandos Street, Cavendish Square, W.—Clinical evening. Cases in attendance at 8 p.m.

ROYAL SOCIETY OF MEDICINE:

ODONTOLOGICAL SECTION, 20, Hanover Square, W., 8 p.m.—Paper:—Mr. H. Simms: Some Experiments on the Action of Formalin and other Root Dressings. Communication;—Messrs. H. Chapman and E. R. Carling: A case of Round-celled Sarcoma of the Lower Jaw.

TUESDAY.

ROYAL SOCIETY OF MEDICINE:

MEDICAL SECTION, 20, Hanover Square, W., 5.30 p.m.—Paper:—Dr. O. K. Williamson: Clinical Observations on the Influence of the Vessel Wall on (so-called) Arterial Blood-pressure Readings.

FRIDAY.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, W.C., 5 p.m.—Museum Demonstration by Professor Keith on some Specimens of Cleft Palate and Malformations of the Tongue.

ROYAL SOCIETY OF MEDICINE:

CLINICAL SECTION, 20, Hanover Square, W., 8 p.m., Cases and Specimens. 9.40 p.m., Paper:—Mr. W. Fedde Fedden: Six cases of Infective Gangrene of the Extremities.

POST-GRADUATE COURSES AND LECTURES.

CENTRAL LONDON THROAT AND EAR HOSPITAL, Gray's Inn Road, W.C.—Lectures: Tuesday, 3.45 p.m., Accessory Sinuses; Friday, 3.45 p.m., Accessory Sinuses.

MEDICAL GRADUATES' COLLEGE AND POLYCLINIC, 22, Chenies Street, W.C.—The following clinical demonstrations have been arranged for next week at 4 p.m. each day: Monday, Skin; Tuesday, Medical; Wednesday, Surgical; Thursday, Surgical; Friday, Ear, Nose, and Throat.

NORTH-EAST LONDON POST-GRADUATE COLLEGE, Prince of Wales's General Hospital, Tottenham, N.—Monday, Clinics, 10 a.m., Surgical Out-patient, 2.30 p.m., Medical Out-patient: Nose, Throat, and Ear; X Rays; 4.30 p.m., Medical In-patient. Tuesday, 10 a.m., Medical Out-patient Clinic; 2.30 p.m., Operations; Clinics: Surgical, Gynaecological. Wednesday, 2.30 p.m., Medical Out-patient, Skin, and Eye Clinics. Thursday, 2.30 p.m., Gynaecological Operations; Clinics: Medical Out-patient; Surgical Out-patient: X Rays; 3 p.m., Medical In-patient. Friday, Clinic: 10 a.m., Surgical Out-patient; 2.30 p.m., Operations; Clinics: Medical Out-patient, Eye; 3 p.m., Medical In-patient.

BOOKS, ETC., RECEIVED.

Der Schiffsarzt. Von Dr. M. Brenning and Dr. E. H. Oppenheimer. Berlin: A. Hirschwald. 1909. M.1.60.

Handbuch gesamten Therapie. In sieben Bänden. Herausgegeben von Drs. F. Penzoldt and Dr. R. Stintzing. Vierte Auflage des Handbuchs der Therapie innerer Krankheiten. Zweite Lieferung. Jena: G. Fischer. 1909. M.4.50.

Uber die Wirkung moderner Projektile. Von Dr. F. Riedinger. Festrede zur feier des 59 Stiftungsfestes der physikalisch-medizinischen Gesellschaft zu Würzburg. Würzburg: C. Kabitzsch (A. Stuber). 1909. M.4.

The Income Tax Incubus and the Budget. By T. H. Fry. London: H. Cox ("Law Times" Office). 1909. 1s.

La Renaissance de l'ophtalmologie. Par le Dr. J. Hirschberg. Traduit de l'Allemand par le Dr. D. van Duyse. Leipzig: W. Engelmann. 1908. M.6.

Notes on Soured Milk and other Methods of Administering Selected Lactic Germs in Intestinal Bacterio-Therapy. By E. Metchnikoff. London: J. Bale, Sons, and Danielsson, Limited. 1909. 1s.

Nutrition and Evolution. By H. Reinheimer. London: J. M. Watkins. 1909. 6s.

Dental Surgery Notes. By E. B. Dowsett, L.R.C.P., M.R.C.S., L.D.S. London: The Dental Manufacturing Company. 1909. 3s.

CALENDAR OF THE ASSOCIATION.

Date.	Meetings to be Held.
APRIL.	
25 Sunday ..	
26 MONDAY ..	
27 TUESDAY ..	HAMPSTEAD DIVISION, *Metropolitan Counties Branch*, Business Meeting.
28 WEDNESDAY	**Central Council, 2 p.m.**, New Council Room, 429, Strand, W.C. LONDON: Organization Committee, 10.45 a.m. BATH AND BRISTOL BRANCH, Museum, Bath, 8 p.m.; Council Meeting, 7.55 p.m. LEICESTER AND RUTLAND DIVISION, *Midland Branch*, Leicester Infirmary, 4.15 p.m.
29 THURSDAY ..	STAFFORDSHIRE BRANCH, General Meeting, Victoria Hotel, Wolverhampton, 5.25 p.m.; Council, before General Meeting; Dinner, 7 p.m.
30 FRIDAY ..	BIRMINGHAM BRANCH, Pathological and Clinical Section, Medical Institute, Edmund Street, 8 p.m. SWANSEA DIVISION, *South Wales and Monmouthshire Branch*, 3 p.m.
MAY.	
1 SATURDAY ..	
2 Sunday ..	
3 MONDAY ..	
4 TUESDAY ..	ST. PANCRAS AND ISLINGTON DIVISION, *Metropolitan Counties Branch*, Midland Grand Hotel, King's Cross, 9 p.m.
MAY *(Continued)*.	
5 WEDNESDAY	DORSET AND WEST HANTS BRANCH, Spring Meeting, Dorchester. SOUTH-EASTERN OF IRELAND BRANCH, Annual Meeting, also meeting of Branch Council and Local Division, Victoria Hotel, Kilkenny, 5.15 p.m.
6 THURSDAY ..	BEDFORD AND HERTS DIVISION, *South Midland Branch*, County Hospital, Bedford, 3 p.m. LAMBETH DIVISION, *Metropolitan Counties Branch*, Annual General Meeting, Bethlem Royal Hospital, 4 p.m.
7 FRIDAY ..	SWANSEA DIVISION, *South Wales and Monmouthshire Branch*, 8.15 p.m.
8 SATURDAY ..	ULSTER BRANCH, Spring Meeting, Londonderry.
9 Sunday ..	
10 MONDAY ..	
11 TUESDAY ..	
12 WEDNESDAY	RICHMOND DIVISION, *Metropolitan Counties Branch*, Annual Meeting, Royal Hospital, Richmond, 8.30 p.m.
13 THURSDAY ..	
14 FRIDAY ..	
15 SATURDAY ..	CEYLON BRANCH, Ordinary Meeting, Colonial Medical Library, 2.30 p.m.
16 Sunday ..	
17 MONDAY ..	
18 TUESDAY ..	
19 WEDNESDAY	CARDIFF DIVISION, *South Wales and Monmouthshire Branch*, Annual Meeting, Cardiff.

ANNUAL MEETING, BRITISH MEDICAL ASSOCIATION, BELFAST, 1909.

THE Seventy-seventh Annual Meeting of the British Medical Association will be held at Belfast from July 23rd, to July 31st, 1909, under the Presidency of Sir William Whitla.

The Annual Representative Meeting commences in Belfast on July 23rd. The Presidential Address will be delivered on July 27th. The Sections will meet on July 28th, 29th, and 30th.

A preliminary programme of arrangements was published in the SUPPLEMENT of April 17th, p. 174. The Honorary Local Secretaries are: Henry Lawrence McKisack, M.D., M.R.C.P., 17, University Square, Belfast; Cecil Edward Shaw, M.A., M.D., M.Ch., 29, University Square, Belfast; and Howard Stevenson, B.A., M.B., F.R.C.S.I., 2, College Square North, Belfast.

MEMBERSHIP OF THE BRITISH MEDICAL ASSOCIATION.

THE British Medical Association exists for the promotion of medical and the allied sciences, and the maintenance of the honour and the interests of the medical profession.

The Annual Subscription to the British Medical Association is £1 5s. 0d., and the BRITISH MEDICAL JOURNAL is supplied weekly, post free, to every member of the British Medical Association, wherever he may reside.

Forms of application for membership can be obtained from the General Secretary, 429, Strand, W.C.

The principal rules governing the election of a medical practitioner to be a member of the British Medical Association are as follow:

Article III.—Any Medical Practitioner registered in the United Kingdom under the Medical Acts and any Medical Practitioner residing within the area of any Branch of the Association situate in any part of the British Empire other than the United Kingdom, who is so registered or possesses such medical qualifications as shall, subject to the regulations, be prescribed by the Rules of the said Branch, shall be eligible as a Member of the Association. The mode and conditions of election to Membership shall from time to time be determined by or in accordance with the By-laws. Every Member, whether one of the existing Members or a subsequently-elected Member, shall remain a member until he ceases to be a Member in accordance with the provisions hereof.

By-law 1.—Every candidate for Membership of the Association shall apply for election in writing, addressed to the Association, and stating his agreement, if elected, to abide by the Regulations and By-laws of the Association, and the Rules of such Division and Branch to which he may at any time belong, and to pay his subscription for the current year.

-law 2.—Every candidate who resides within the area of a Branch shall forward his application to the Secretary of such Branch. Notice of the proposed election shall be sent by the Branch Secretary to the General Secretary of the Association, and to every Member of the Branch Council, and the candidate, if not disqualified by any Regulation of the Association, may be elected a Member of the Association by the Branch Council at any meeting thereof held not less than seven days (or such longer period as the Branch may by its Rules prescribe) after the date of the said notice. A Branch may by special Resolution require that each candidate for election to the Association shall furnish a certificate from two Members of the Association to whom he is personally known. Officers of the Navy, Army, and Indian Medical Services on the Active List are eligible for election through the Council or a Branch without approving signatures as laid down in By-law 3.

By-law 3.—Every candidate whose place of residence is not included in the area of any Branch shall forward his Application to the General Secretary of the Association, together with a statement signed by three Members of the Association, that from personal knowledge they consider him a suitable person for election. Notice of the proposed election shall be sent by the General Secretary to every Member of the Council, and the candidate, if not disqualified by any Regulation of the Association, may be elected a Member of the Association by the Council at any meeting thereof held not less than one month after the date of the said notice.

The annual subscription to the BRITISH MEDICAL JOURNAL for non-members is £1 8s. 0d. for the United Kingdom, and £1 15s. 0d. for abroad.

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